Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012 D Employer identification number B Check if applicable VIRGINIA EDUCATION ASSOCIATION FUND Address change FOR CHILDREN AND PUBLIC EDUCATION 54-1041123 Doing Business As E Telephone number Name change (804) 648-5801 Initial return umber and street (or P O box if mail is not delivered to street address) G Gross receipts \$ 212,430 116 SOUTH THIRD STREET Terminated Amended return City or town, state or country, and ZIP + 4 RICHMOND, VA 23219 Application pending Name and address of principal officer **H(a)** Is this a group return for ROGER GRAY ΓYes **Γ**Nο affiliates? 116 SOUTH THIRD STREET RICHMOND, VA 23219 H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 H(c)Website: ► WWW VEANEA ORG L Year of formation 1971 M State of legal domicile VA Summary Part I Briefly describe the organization's mission or most significant activities TO ELECT "FRIENDS OF EDUCATION" TO LOCAL & STATE OFFICE TO ENCOURAGE AND ASSIST IN THE FORMATION OF LOCAL AND MULTI-LOCAL POLITICAL ACTION GROUPS Activities & Governance 2 Check this box 🚩 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . 16 4 Number of independent voting members of the governing body (Part VI, line 1b) . 14 5 0 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 0 6 Total number of volunteers (estimate if necessary) 6 7a 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 . b Net unrelated business taxable income from Form 990-T, line 34 7b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 154,317 212,422 Program service revenue (Part VIII, line 2g) . 0 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 22 8 10 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 154,339 212.430 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 59,113 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-15 Expenses O 0 10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 60,357 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶69,484 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 1,894 315,818 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 121,364 315,818 Revenue less expenses Subtract line 18 from line 12 . 32,975 -103,388 LAssets or id Balances **Beginning of Current** End of Year Year 20 14,932 Total assets (Part X, line 16) . . 118,320 21 0 Total liabilities (Part X, line 26) 0 22 Net assets or fund balances Subtract line 21 from line 20 118,320 14,932 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2013-07-15 Signature of officer Sign Here ROGER GRAY OFFICER Type or print name and title Date Check if Preparer's taxpayer identification number E GERARD SHAIA CPA (see instructions) signature Paid employed 🕨 🔽 P00777771

Firm's name (or yours

if self-employed), address, and ZIP + 4

DIXON HUGHES GOODMAN LLP

4510 COX ROAD SUITE 200

GLEN ALLEN, VA 230603394 May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer's

Use Only

EIN ▶ 56-0747981

Phone no (804) 282-7636

▼Yes 「No

Form	990 (2011)				Page 2
Par		f Program Service and le O contains a response	Accomplishments to any question in this Par	: III	୮
1	Briefly describe the oi	rganızatıon's mıssıon			
		DUCATION" TO LOCAL ICAL ACTION GROUPS	& STATE OFFICE TO ENC	OURAGE AND ASSIST IN THE I	FORMATION OF LOCAL
2	the prior Form 990 or	990-EZ?		year which were not listed on	「Yes 「No
		e new services on Schedi			
3	services?		significant changes in how	t conducts, any program	┌ Yes ┌ No
	If "Yes," describe thes	e changes on Schedule O			
4	expenses Section 50:	1(c)(3) and 501(c)(4) org	anizations and section 494	s three largest program services 7(a)(1) trusts are required to rep each program service reported	
4a			187,120 including grants of \$ AISES FUNDS FOR THE PURPOSE (DS OF SUPERVISORS OR CITY CO	DF CAMPAIGN CONTRIBUTIONS TO CAND) DIDATES FOR THE LEGISTLATURE,
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		/-			
4d	Other program servic (Expenses \$	es (Describe in Schedule includin	eO) ggrants of\$) (Revenue \$)
4e	Total program service	e expenses > \$	187,120		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a		Νο
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		Νο
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νο
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νo
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section $512(b)(13)$?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	•1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
L	Tabout he number of Fermer W. 3.C. restricted in time 1 a. Foton 0. doubt each lead to			
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3Ь		
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νο
ь	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a	Yes	
u	organization solicit any contributions that were not tax deductible?	Ja	162	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
3	year Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
-	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
c	the states in which the organization is licensed to issue qualified health plans Enter the aggregate amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

contains a response to any question in this Part						. 🗸

Se	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax							
b	year							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No.				
4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5		N o N o				
6	Did the organization have members or stockholders?	6		Νο				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9								
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
INC	venue code.)		Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νο				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Νο				
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c						
13	Did the organization have a written whistleblower policy?	13		Νο				
14	Did the organization have a written document retention and destruction policy?	14		Νο				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		Νo				
ь	Other officers or key employees of the organization	15b		Νo				
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		Νο				
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b						
Se	ction C. Disclosure							
17	List the States with which a copy of this Form 990 is required to be filed ►VA							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply							

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 ROGER GRAY

116 SOUTH THIRD STREET RICHMOND, VA 23219

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) A verage hours per week (describe hours	Position more unles:	on (de thai	C) o not n one son er ar	t che e bo is bo id a tee)	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former		MISC)	organizations
(1) HOLLY JACKSON-CONRAD BOARD MEMBER	4 00	х						0	0	0
(2) MALIA HUDDLE BOARD MEMBER	4 00	х						0	0	0
(3) CAROL BAUER BOARD MEMBER	4 00	х						0	0	0
(4) ROBERT BUTLER JR BOARD MEMBER	4 00	Х						0	0	0
(5) MARJORIE CLARK BOARD MEMBER	4 00	Х						0	0	0
(6) JUSTIIN FORRESTER BOARD MEMBER	4 00	Х						0	0	0
(7) JAIM FOSTER BOARD MEMBER	4 00	х						0	0	0
(8) KELLY WALKER BOARD MEMBER	4 00	Х						0	0	0
(9) FRED H VANN JR BOARD MEMBER	4 00	Х						0	0	0
(10) STEVE WHITTEN BOARD MEMBER	4 00	х						0	0	0
(11) CHERYL SPROUSE BOARD MEMBER	4 00	х						0	0	0
(12) CHERRAL MOORE BOARD MEMBER	4 00	х						0	0	0
(13) JIM LIVINGSTON BOARD MEMBER	4 00	х						0	0	0
(14) ANITA JACKSON BOARD MEMBER	4 00	х						0	0	0
(15) MEG GRUBER CHAIRPERSON	4 00			х				0	7,734	0
(16) DOMINIC MELITO VICE CHAIRPERSON	4 00			Х				0	0	0

Part VIII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n on son er aı	e bo is b nd a	x, oth		Repo compe fror organiza	D) ortable ensation in the ation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	Esti amount compe froi organiz	F) mated of other ensation on the ation and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		ated Izations
1b	Sub-Total			<u> </u> 	<u> </u>			<u> </u>					
С	Total from continuation sheets	to Part VII, Sec	t ion A		•	•				2	7.70	4	
2	Total (add lines 1b and 1c) . Total number of individuals (inclusion),000 of reportable compens	_	nited to	thos	e lıs		• above) who	receive	0 d more tha	7,73 in	4	0
3	Did the organization list any form on line 1a? <i>If "Yes," complete Sch</i>					ey e	mploy •	ee, c	or highest	t compens	ated employee	Yes	No No
4	For any individual listed on line 1 organization and related organization.											4	No
5	Did any person listed on line 1a is services rendered to the organization.									anızatıon d	or individual for •	5	No
	ction B. Independent Con												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax you	the organizatio ear									ng with		(0)
	Nam	(A) ne and business add	Iress							Desci	(B) ription of services		(C) pensation
	Fotal number of independent conti \$100,000 of compensation from t			ot lin	nıted	d to	those	liste	d above)	who receiv	ved more than		

Form 990 (2011) Page 9								
Part V	<u> </u>	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514		
nts Dts	1a	Federated campaigns 1a						
gra	ь	Membership dues 1b						
its, ⊞	С	Fundraising events 1c						
<u>=</u>	d	Related organizations 1d Government grants (contributions) 1e						
Contributions, gifts, grants and other similar amounts	e •		 12,422					
黃	' '	similar amounts not included above						
를 등 당 등	g	Noncash contributions included in lines 1a-1f \$						
ခ် မြ	h	Total. Add lines 1a-1f	212,422					
<u>a</u>		Business (Code					
Program Service Revenue	2a							
<u>æ</u>	Ь							
Š	c d							
32	e							
<u> </u>	f	All other program service revenue						
چّ	_	Total. Add lines 2a-2f	h.					
	g 3	Investment income (including dividends, interest						
		and other similar amounts)	▶ 8					
	4	Income from investment of tax-exempt bond proceeds	. •					
	5	Royalties	. •					
	6a	(I) Real (II) Perso	nai					
	ь	Less rental						
	С	expenses Rental income						
	d	or (loss) Net rental income or (loss)	. 🕨					
		(i) Securities (ii) Othe	er					
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
	с	sales expenses Gain or (loss)						
	d	Net gain or (loss)	.*					
ψ.	8a	Gross income from fundraising events (not including						
Other Revenue		\$ of contributions reported on line 1c) See Part IV, line 18						
ē	ь	Less direct expenses b						
₹	с	Net income or (loss) from fundraising events	▶					
	9a	Gross income from gaming activities See Part IV, line 19						
	ь	Less direct expenses b						
	c	Net income or (loss) from gaming activities	*					
	10a	Gross sales of inventory, less returns and allowances .						
	b	Less cost of goods sold b						
	С	Net income or (loss) from sales of inventory Miscellaneous Revenue Business C						
	11a							
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d	▶					
	12	Total revenue. See Instructions	212,430					

Part IX Statement of Functional Expenses

combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 5 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Fees for services (non-employees) 11 Management Legal Accounting Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees g Advertising and promotion . . . 12 Office expenses 13 14 Information technology 15 Royalties . . 16 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 19 Conferences, conventions, and meetings 20 21 Payments to affiliates . 22 Depreciation, depletion, and amortization 23 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f Ifline 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) CANDIDATE CONTRIBUTIONS 125,000 125,000 69,484 FUNDRAISING EXPENDITURE 69,484 PAYMENTS TO AFFILIATED 59,514 59,514 d SSF FUNDS TRANSFER 59,214 59,214 e f All other expenses 2,606 2,606 25 Total functional expenses. Add lines 1 through 24f 315,818 187,120 59,214 69,484 Joint costs. Check here ► 🗆 If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a

Part X Balance Sheet (A) (B) Beginning of year End of year 118.320 14,932 1 1 2 2 Savings and temporary cash investments 3 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 Land, buildings, and equipment cost or other basis Complete Part 10a VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 118,320 16 14,932 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 16 17 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶

and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ 🔽 and complete lines 30 through 34. ö 0 0 30 Capital stock or trust principal, or current funds 30 Assets 0 31 0 31 Paid-in or capital surplus, or land, building or equipment fund 0 -103,388 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 118.320 33 14.932 34 Total liabilities and net assets/fund balances 118.320 14.932 34

Pal	Check if Schedule O contains a response to any question in this Part XI			.୮		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2	212,43	
2	Total expenses (must equal Part IX, column (A), line 25)	2	315,			
3	Revenue less expenses Subtract line 2 from line 1					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	118,32	
5	Other changes in net assets or fund balances (explain in Schedule O)	5				
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6			14,93	
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII			୮		
				Yes	No	
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No	
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b	_		

DLN: 93493196009723

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public

f the organization answered "Yes,"	to Form 990, Part IV, Li	ine 3, or Form 990-EZ,	Part V, line 46 (Political	Campaign Activities),
hen				

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
VIRGINIA EDUCATION ASSOCIATION FUND
FOR CHILDREN AND PUBLIC EDUCATION

Employer identification number

54-1041123

|--|

- Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV 2 Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? □ No Was a correction made? □ No b If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? __Yes
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	edule C (Form 990 or 990-EZ) 2011					Page 2
Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)	(3) and file	ed Form 5768	(election
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		affiliated grou	up member's nam	e, address, EIN,
<u> </u>	Limits on Lobbying E (The term "expenditures" means a	xpenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
	Total lobbying expenditures to influence public of	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	/ing)	-		
c	Total lobbying expenditures (add lines 1a and 1	b)		Ī		
d	Other exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount columns	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	00		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00			
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)				1
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		Γ		
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -		Γ		
j	If there is an amount other than zero on either lissection 4911 tax for this year?	ne 1h or line 1ı, did the	organization file Fo	orm 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t		ection do not h r lines 2a throu	avè to con ıgh 2f on p		ne five
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying non-taxable amount					
ь —	Lobbying ceiling amount (150% of line 2a, column(e))					
_с	Total lobbying expenditures					
d	Grassroots non-taxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

		(a)		(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
е	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes". Dues, assessments and similar amounts from members

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Tayable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
ORGANIZATIONS DIRECT AND INDIRECT POLITICAL CAMPAIGN ACTIVITIES	· · · · · · - · · · , · · -	PROVIDES SUPPORT TO CANDIDATES AT THE STATE AND LOCAL LEVELS VIEWED AS FRIENDS OF EDUCATION
PART IV, SUPPLEMENTAL INFORMATION		VIRGINIA EDUCATION ASSOCIATION FUND FOR CHILDREN AND PUBLIC EDUCATION (VEA-FUND), FORMERLY THE VIRGINIA EDUCATION ASSOCIATION POLITICAL ACTION COMMITTEE, WAS ESTABLISHED BY THE MANAGEMENT OF THE VIRGINIA EDUCATION ASSOCIATION (VEA), AN AFFILIATE, TO PROVIDE SUPPORT TO CANDIDATES AT THE STATE AND LOCAL LEVELS VIEWED AS FRIENDS OF EDUCATION VEA-FUND IS REGISTERED WITH THE VIRGINIA STATE BOARD OF ELECTIONS AND IS GOVERNED BY THE FAIR ELECTIONS PRACTICES ACT, AS AMENDED

1

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DLN: 93493196009723

OMB No 1545-0047

Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization VIRGINIA EDUCATION ASSOCIATION FUND FOR CHILDREN AND PUBLIC EDUCATION 54-1041123 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ☐ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year 🛌 Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Schedule D (Form 990) 2011

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Part	Organizations Maintaining Co	<u>llections of Art</u>	t, His	tori	<u>cal Tr</u>	<u>easur</u>	es, or O	ther	Simila	r Asse	ts (cc	ntınued)
	Using the organization's accession and other items (check all that apply)	records, check an	y of th	ie foll	lowing t	hat are	a significa	ant us	e of its co	ollection		
а	Public exhibition		d	Γ	Loan	orexcha	ange progr	rams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	llections and expla	ıın hov	v the	y furthe	r the or	ganızatıon	ı's exe	empt purp	ose in		
	During the year, did the organization solicit cassets to be sold to raise funds rather than t			,					lar	Γ.	Yes	┌ No
Pari	Part IV, line 9, or reported an an						answere	d "Ye	es" to Fo	rm 990	,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontrıbu	tions or	other ass	ets n	ot	Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Г			A mou	nt	
c	Beginning balance						ľ	1c				
d	Additions during the year							1d				
e	Distributions during the year						r	1e				
f	Ending balance						T	1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?				L	I		Г,	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV									,		,
Par			n ans	were	ed "Ye	s" to Fo	orm 990.	Part	: IV. line	10.		
		(a)Current Year		Prior `			Years Back		hree Years		Four Y	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
е	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held :	as									
а	Board designated or quasi-endowment 🕨											
ь	Permanent endowment											
с	Term endowment ▶											
	Are there endowment funds not in the posses organization by	ssion of the organiz	ation t	that a	are held	l and ad	mınıstere	d for t	he		Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
	If "Yes" to 3a(II), are the related organization	-						•		3b		
4	Describe in Part XIV the intended uses of the											
Part	VI Land, Buildings, and Equipme	nt. See Form 99	<u>ю, Ра</u>								Τ	
	Description of property				a) Cost o		(b)Cost or basis (ot		(c) Accur depred		(d) B	ook value
1 a L	and		•									
b E	Buildings		•									
c L	easehold improvements		•	\vdash								
	quipment		•								1	
e (Other			- 1			1		I		1	
	. A dd lines 1a-1e <i>(Column (d) should equal Fo</i>								▶		+	

Part VIII Investments—Other Securities. See	<u>Form 990, Part X, line 1</u>	.2.
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	(D)DOOK Value	Cost or end-of-year market value
(1)Financial derivatives	1	
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lir		
(a) Descrip	tion	(b) Book value
Total. (Column (h) should equal Form 990, Part Y, col (R) line 1	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X	, line 25.	, , , , .
Part X Other Liabilities. See Form 990, Part X	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	.
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	

	Reconcination of Change in Net Assets from Form 990 to Financial Statemen		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	212,430
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	315,818
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-103,388
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-103,388
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	212,430
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	212,430
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	212,430
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	315,818
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	315,818
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	315,818
	t XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Ret urn Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		VEA-FUND IS A TAX-EXEMPT POLITICAL ORGANIZATION AS DEFINED UNDER SECTION 527 OF THE INTERNAL REVENUE CODE, AS AMENDED VEA-FUND IS NOT REQUIRED TO PAY TAXES ON INCOME GENERATED WITHIN ITS EXEMPT FUNCTION AS A POLITICAL ORGANIZATION, HOWEVER, VEA-FUND IS LIABLE FOR INCOME TAXES AT THE SPECIFIED STATUTORY RATE ON EARNINGS GENERATED FROM NONEXEMPT ACTIVITIES, SUCH AS INTEREST INCOME

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization	Employer identifi	cation number
VIRGINIA EDUCATION ASSOCIATION FUND		
FOR CHILDREN AND PUBLIC EDUCATION	54-1041123	

Identifier	Return Reference	Explanation
		THE 990 IS PROVIDED TO THE EXECUTIVE COMMITTTEE PRIOR TO FILING THE RETURN IS REVIEWED BY THE COMMITTEE AND ANY CHANGES ARE MADE ACCORDINGLY PRIOR TO FINAL SUBMISSION
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493196009723

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
VIRGINIA EDUCATION ASSOCIATION FUND
FOR CHILDREN AND PUBLIC EDUCATION

54-1041123

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

Employer identification number

	<u> </u>		*	· · · · · · · · · · · · · · · · · · ·	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 cont	(g) 512(b)(13) ntrolled nnization	
						Yes	No	
(1) VIRGINIA EDUCATION ASSOCIATION								
116 SOUTH THIRD STREET	ADVOCACY FOR STUDENTS AND PUBLIC EDUCATION	VA	501(C)(5)				No	
RICHMOND, VA 23219 54-0540102	PROFESSIONALS							
For Drivery Ast and Denominals Deduction Ast Natice and the Institute		Cat No EO:			Sahadula B /E			

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part I'	V, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partr	al or ging	(k) Percentage ownership
							Yes	No		Yes	No	
											,	
												_

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

Schedule R (Form 990) 2011				Pa	age 3
Part V Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pa	t IV, line 34, 35, 35A, or 36	.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related org	anızatıons lısted ın Part	s II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Sale of assets to related organization(s)			1f		No
g Purchase of assets from related organization(s)			1 g		No
h Exchange of assets with related organization(s)			1h		No
i Lease of facilities, equipment, or other assets to related organization(s)			1 i		No
j Lease of facilities, equipment, or other assets from related organization(s)			1 j		No
k Performance of services or membership or fundraising solicitations for related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations by related organization(s)			11		No
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1m		No
n Sharing of paid employees with related organization(s)			1 n		No
Reimbursement paid to related organization(s) for expenses			10		No
p Reimbursement paid by related organization(s) for expenses			1р		No
q Other transfer of cash or property to related organization(s)			1 q	Yes	-
r Other transfer of cash or property from related organization(s)			1r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered relat	onships and transaction thresho	olds		
(a) Name of other organization	(b) Transaction type(a-r)	(6)	(d) of determi involve		nount

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) VIRGINIA EDUCATION ASSOCIATION	Q	59,214	CASH PAYMENT
(2)			
(3)			
(4) 			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) (j) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		eral or agıng) (k)
			311)	Yes	No			Yes	No		Yes	No	1
												<u> </u>	
												<u> </u>	
												<u> </u>	
												<u> </u>	
												<u> </u>	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Ident if ier	Ret urn Reference	Explanat ion	L.

Schedule R (Form 990) 2011